

Fill in this information to identify your case:

Debtor 1 LYDIA LUTAYA
First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing)
First Name Middle Name Last Name

United States Bankruptcy Court for the: Western District of WA

Case number 16-10516-CMA
(if known)

FILED

2016 FEB 17 AM 9:47

M. L. HATCHER, CLK
 U.S. BANKRUPTCY COURT
 W.D. OF WA AT SEATTLE

Check if this is an amended filing ☐

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

	Your assets <small>Value of what you own</small>
1. <i>Schedule A/B: Property</i> (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>	\$ <u>203,627.00</u>
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	\$ <u>10,300</u>
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	\$ <u>213,927</u>

Part 2: Summarize Your Liabilities

	Your liabilities <small>Amount you owe</small>
2. <i>Schedule D: Creditors Who Have Claims Secured by Property</i> (Official Form 106D)	
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i>	\$ <u>243,000</u>
3. <i>Schedule E/F: Creditors Who Have Unsecured Claims</i> (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ <u>43,669</u>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	+ \$ <u>0</u>
Your total liabilities	\$ <u>286,669</u>

Part 3: Summarize Your Income and Expenses

4. <i>Schedule I: Your Income</i> (Official Form 106I)	
Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ <u>1350</u>
5. <i>Schedule J: Your Expenses</i> (Official Form 106J)	
Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$ <u>2,730</u>

Debtor 1

LYDIA LUTANNA
 First Name Middle Name Last Name

Case number (if known) 16-10516-CMA

Part 4: Answer These Questions for Administrative and Statistical Records
6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes

7. What kind of debt do you have?

- ☒ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 1350

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F.

Total claim

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.)

\$ 0

9b. Taxes and certain other debts you owe the government. (Copy line 6b.)

\$ 1000

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

\$ 0

9d. Student loans. (Copy line 6f.)

\$ 0

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)

\$ 0

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

+ \$ 0

9g. Total. Add lines 9a through 9f.

\$ 1000

Fill in this information to identify your case and this filing:

Debtor 1 LYDIA LUTANYA
First Name Middle Name Last Name
Debtor 2
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: Western District of WA
Case number 16-10516-CMA

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
☒ Yes. Where is the property?

1.1. 3001 SE 10TH ST
Street address, if available, or other description
1013
RENTON WA 98058
City State ZIP Code
KING
County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☒ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \$ 203,627
Current value of the portion you own? \$ 203,627

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

free simple

☐ Check if this is community property (see instructions)

If you own or have more than one, list here:

1.2. _____
Street address, if available, or other description

City State ZIP Code

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \$ _____
Current value of the portion you own? \$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ Check if this is community property (see instructions)

Debtor 1

First Name

Middle Name

Last Name

LYDIA

LUTANYA

Case number (if known)

16-10516-CMA

1.3.

Street address, if available, or other description

City

State

ZIP Code

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claim on Schedule D. Creditors Who Have Claims Secured by Property

Current value of the entire property?

\$ _____

Current value of the portion you own?

\$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. _____

\$ 203,627.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☒ No
☐ Yes

3.1. Make: _____

Model: _____

Year: _____

Approximate mileage: _____

Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claim on Schedule D. Creditors Who Have Claims Secured by Property

Current value of the entire property?

\$ _____

Current value of the portion you own?

\$ _____

If you own or have more than one, describe here:

3.2. Make: _____

Model: _____

Year: _____

Approximate mileage: _____

Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claim on Schedule D. Creditors Who Have Claims Secured by Property

Current value of the entire property?

\$ _____

Current value of the portion you own?

\$ _____

Debtor 1

First Name

Middle Name

Last Name

LYDIA

LUTAYA

Case number (if known)

16-10516-CMA

3.3. Make: _____
 Model: _____
 Year: _____
 Approximate mileage: _____
 Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims or exemptions of creditors who have claims against the property.

Current value of the entire property?

Current value of the portion you own?

\$ _____

\$ _____

3.4. Make: _____
 Model: _____
 Year: _____
 Approximate mileage: _____
 Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims or exemptions of creditors who have claims against the property.

Current value of the entire property?

Current value of the portion you own?

\$ _____

\$ _____

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

☒ No

☐ Yes

4.1. Make: _____
 Model: _____
 Year: _____
 Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims or exemptions of creditors who have claims against the property.

Current value of the entire property?

Current value of the portion you own?

\$ _____

\$ _____

If you own or have more than one, list here:

4.2. Make: _____
 Model: _____
 Year: _____
 Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims or exemptions of creditors who have claims against the property.

Current value of the entire property?

Current value of the portion you own?

\$ _____

\$ _____

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here



\$ 0

Debtor 1

LYDIA

First Name

LUTANYA

Middle Name

Last Name

Case number (if known) 16-10516-CMA

Part 3: Describe Your Personal and Household Items**Do you own or have any legal or equitable interest in any of the following items?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

6. Household goods and furnishings*Examples:* Major appliances, furniture, linens, china, kitchenware☐ No☒ Yes. Describe.....

\$ 300

7. Electronics*Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games☐ No☐ Yes. Describe.....

\$

8. Collectibles of value*Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles☐ No☒ Yes. Describe.....

ARTWORK, ART OBJECT

\$ 7,500

9. Equipment for sports and hobbies*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments☐ No☐ Yes. Describe.....

\$

10. Firearms*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment☐ No☐ Yes. Describe.....

\$

11. Clothes*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories☐ No☐ Yes. Describe.....

\$

12. Jewelry*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver☐ No☐ Yes. Describe.....

\$

13. Non-farm animals*Examples:* Dogs, cats, birds, horses☐ No☐ Yes. Describe.....

\$

14. Any other personal and household items you did not already list, including any health aids you did not list☐ No☐ Yes. Give specific information.....

\$

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$ 8,300

Debtor 1

LYDIA
First Name

Middle Name

LUTAYA
Last Name

Case number (if known) 16-10516-CMA

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the
portion you own?
Do not deduct secured claims
or exemptions.**16. Cash**

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No☒ Yes

Cash: \$ 500

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No☒ Yes

Institution name:

17.1. Checking account:	_____	\$ _____
17.2. Checking account:	_____	\$ _____
17.3. Savings account:	BECU - Account ending: 6669	\$ 1500
17.4. Savings account:	_____	\$ _____
17.5. Certificates of deposit:	_____	\$ _____
17.6. Other financial account:	_____	\$ _____
17.7. Other financial account:	_____	\$ _____
17.8. Other financial account:	_____	\$ _____
17.9. Other financial account:	_____	\$ _____

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No☐ Yes

Institution or issuer name:

_____	\$ _____
_____	\$ _____
_____	\$ _____

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture☒ No☐ Yes. Give specific
information about
them.

Name of entity:

% of ownership:

_____	0% _____	\$ _____
_____	0% _____	\$ _____
_____	0% _____	\$ _____

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☒ No☐ Yes. Give specific information about them.....

Issuer name:

\$ _____
 \$ _____
 \$ _____

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No☐ Yes. List each

account separately.

Type of account:

Institution name:

401(k) or similar plan:

Pension plan:

IRA:

Retirement account:

Keogh:

Additional account:

Additional account:

\$ _____
 \$ _____
 \$ _____
 \$ _____
 \$ _____
 \$ _____
 \$ _____

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No☐ Yes

Institution name or individual:

Electric:

Gas:

Heating oil:

Security deposit on rental unit:

Prepaid rent:

Telephone:

Water:

Rented furniture:

Other:

\$ _____
 \$ _____
 \$ _____
 \$ _____
 \$ _____
 \$ _____
 \$ _____
 \$ _____
 \$ _____

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)☒ No☐ Yes

Issuer name and description:

\$ _____
 \$ _____
 \$ _____

Debtor 1

LYDIA
First Name

Middle Name

LUTAYA
Last Name

Case number (if known) 16-10516-CMA

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No☐ Yes

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

_____	\$ _____
_____	\$ _____
_____	\$ _____

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit☒ No☐ Yes. Give specific information about them....

_____	\$ _____
-------	----------

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No☐ Yes. Give specific information about them....

_____	\$ _____
-------	----------

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No☐ Yes. Give specific information about them....

_____	\$ _____
-------	----------

Money or property owed to you?**Current value of the portion you own?**
Do not deduct secured claims or exemptions.**28. Tax refunds owed to you**☒ No☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.

--

Federal:	\$ _____
State:	\$ _____
Local:	\$ _____

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No☐ Yes. Give specific information.....

--

Alimony:	\$ _____
Maintenance:	\$ _____
Support:	\$ _____
Divorce settlement:	\$ _____
Property settlement:	\$ _____

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No☐ Yes. Give specific information.....

_____	\$ _____
-------	----------

Debtor 1

LYDIA

First Name Middle Name

LUTANYA

Last Name

Case number (if known) 16-10516-CMA

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☒ No☐ Yes. Name the insurance company of each policy and list its value. ...

Company name:

Beneficiary:

Surrender or refund value:

\$ _____

\$ _____

\$ _____

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No☐ Yes. Give specific information.

\$ _____

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☒ No☐ Yes. Describe each claim.

\$ _____

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims☒ No☐ Yes. Describe each claim.

\$ _____

35. Any financial assets you did not already list☒ No☐ Yes. Give specific information.

\$ _____

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here

\$ _____

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**37. Do you own or have any legal or equitable interest in any business-related property?**☒ No. Go to Part 6.☐ Yes. Go to line 38.

Current value of the
portion you own.
Do not include secured claims
or exemptions.

38. Accounts receivable or commissions you already earned☒ No☐ Yes. Describe.

\$ _____

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

☒ No☐ Yes. Describe.

\$ _____

Debtor 1

LYDIA

First Name

LUTAYA

Middle Name

Last Name

Case number (if known)

16-10516-CMA

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade☒ No☐ Yes. Describe.....

\$

41. Inventory☒ No☐ Yes. Describe.....

\$

42. Interests in partnerships or joint ventures☒ No☐ Yes. Describe.....

Name of entity:

% of ownership:

%

\$

%

\$

%

\$

43. Customer lists, mailing lists, or other compilations☐ No☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?☐ No☐ Yes. Describe.....

\$

44. Any business-related property you did not already list☐ No☐ Yes. Give specific information

\$

\$

\$

\$

\$

\$

\$

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here

\$

Part 6:**Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**
If you own or have an interest in farmland, list it in Part 1.**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**☐ No. Go to Part 7.☐ Yes. Go to line 47.

Current value of the
portion you own?
Do not include secured claims
or mortgages.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

☐ No☐ Yes.....

\$

Case number (if known)

Case 16-10516-CMA Doc 17 Filed 02/17/16 Ent. 02/17/16 10:58:04 Pg. 12 of 57

Fill in this information to identify your case:

Debtor 1 LYDIA LOTHARYA
First Name Middle Name Last Name
Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: Western District of WA
Case number 16-10516-CMA
(If known)

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
☒ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: _____ Line from <i>Schedule A/B</i> : _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____ _____ _____
Brief description: _____ Line from <i>Schedule A/B</i> : _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____ _____ _____
Brief description: _____ Line from <i>Schedule A/B</i> : _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____ _____ _____

3. Are you claiming a homestead exemption of more than \$155,675?

(Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.)

☒ No

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

- ☐ No
☐ Yes

Debtor 1

LYDIA

First Name

LUTANYA

Middle Name

Last Name

Case number (if known)

16-10516-CMA

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property

Current value of the portion you own

Amount of the exemption you claim

Specific laws that allow exemption

Copy the value from Schedule A/B

Check only one box for each exemption

Brief description: furniture + appliances \$ 800

Line from Schedule A/B: 6

☒ \$ 800☐ 100% of fair market value, up to any applicable statutory limit

11 USC § 522(d)(3)

Brief description: BCCU Savings Acct \$ 1500

Line from Schedule A/B: 17

☒ \$ 1500☐ 100% of fair market value, up to any applicable statutory limit

11 USC § 522(d)(5)

Brief description: Antiques \$ 7500

Line from Schedule A/B: 8

☒ \$ 7500☐ 100% of fair market value, up to any applicable statutory limit

11 USC § 522(d)(5)

Brief description: \$

Line from Schedule A/B:

☐ \$☐ 100% of fair market value, up to any applicable statutory limit

Brief description: \$

Line from Schedule A/B:

☐ \$☐ 100% of fair market value, up to any applicable statutory limit

Brief description: \$

Line from Schedule A/B:

☐ \$☐ 100% of fair market value, up to any applicable statutory limit

Brief description: \$

Line from Schedule A/B:

☐ \$☐ 100% of fair market value, up to any applicable statutory limit

Brief description: \$

Line from Schedule A/B:

☐ \$☐ 100% of fair market value, up to any applicable statutory limit

Brief description: \$

Line from Schedule A/B:

☐ \$☐ 100% of fair market value, up to any applicable statutory limit

Brief description: \$

Line from Schedule A/B:

☐ \$☐ 100% of fair market value, up to any applicable statutory limit

Brief description: \$

Line from Schedule A/B:

☐ \$☐ 100% of fair market value, up to any applicable statutory limit

Brief description: \$

Line from Schedule A/B:

☐ \$☐ 100% of fair market value, up to any applicable statutory limit

Fill in this information to identify your case:

Debtor 1 LUDIA LUTAYA
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Western District of WA

Case number 16-10516-CMA
(If known)

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Amount of claim Secured by the value of property	Amount of claim Secured by the value of property	Amount of claim Secured by the value of property
\$ 243,000	\$ 203,627	\$ 39,373

2.1 BECC

Creditor's Name
P.O. BOX 97050
Number Street
MS - 1049-1
SEATTLE WA 98124
City State ZIP Code

Describe the property that secures the claim:

3001 SE 10th St #1013
Renton, WA 98058

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who owes the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset) _____

☐ Check if this claim relates to a community debt

Date debt was incurred Oct, 2006

Last 4 digits of account number 4971

2.2

Creditor's Name
Number Street
City State ZIP Code

Describe the property that secures the claim:

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset) _____

☐ Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

\$ 243,000

Debtor 1

LYDIA

Middle Name

LUTAMIA

Last Name

Case number (if known)

16-10516-CMA

Additional Page**Part 1:**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

<p>Creditor's Name _____</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p> <p>Who owes the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred _____</p>	<p>Describe the property that secures the claim: \$ _____ \$ _____ \$ _____</p> <div style="border: 1px solid black; height: 40px; margin: 5px 0;"></div> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p> <p>Last 4 digits of account number _____</p>
<p>Creditor's Name _____</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p> <p>Who owes the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred _____</p>	<p>Describe the property that secures the claim: \$ _____ \$ _____ \$ _____</p> <div style="border: 1px solid black; height: 40px; margin: 5px 0;"></div> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p> <p>Last 4 digits of account number _____</p>
<p>Creditor's Name _____</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p> <p>Who owes the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred _____</p>	<p>Describe the property that secures the claim: \$ _____ \$ _____ \$ _____</p> <div style="border: 1px solid black; height: 40px; margin: 5px 0;"></div> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p> <p>Last 4 digits of account number _____</p>

Add the dollar value of your entries in Column A on this page. Write that number here: \$ 0

If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$ 243,000

Debtor 1

First Name

Middle Name

Last Name

LYDIA

LUTAYA

Case number (if known)

16-10516-CMA

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

<input type="checkbox"/>	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	On which line in Part 1 did you enter the creditor? _____ Last 4 digits of account number _____
<input type="checkbox"/>	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	On which line in Part 1 did you enter the creditor? _____ Last 4 digits of account number _____
<input type="checkbox"/>	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	On which line in Part 1 did you enter the creditor? _____ Last 4 digits of account number _____
<input type="checkbox"/>	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	On which line in Part 1 did you enter the creditor? _____ Last 4 digits of account number _____
<input type="checkbox"/>	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	On which line in Part 1 did you enter the creditor? _____ Last 4 digits of account number _____
<input type="checkbox"/>	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	On which line in Part 1 did you enter the creditor? _____ Last 4 digits of account number _____

Fill in this information to identify your case:

Debtor 1 LYDIA LAUTANAYA
First Name Middle Name Last Name
Debtor 2
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: Western District of WA
Case number 16-10516-CMA
(If known)

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☐ No. Go to Part 2.
☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim amount	Priority amount	Nonpriority amount
--------------------	-----------------	--------------------

2.1 BECCU
Priority Creditor's Name
P.O. BOX 97050
Number Street

Last 4 digits of account number 6669 \$ 5000 \$ 5000 \$ 0

When was the debt incurred? 2010

SEATTLE WA 98124
City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify LINE OF CREDIT

Is the claim subject to offset?

- ☒ No
☐ Yes

2.2 HOME DEPOT CREDIT SERVICES
Priority Creditor's Name
PROCESSING CENTER
Number Street

Last 4 digits of account number 5827 \$ 306 \$ 306 \$ 0

When was the debt incurred? _____

DES MOINES, IA 50364
City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify CREDIT CARD

Is the claim subject to offset?

- ☒ No
☐ Yes

Debtor 1

LYDIA

LUTANYA

Case number (if known)

16-10516-CMA

Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Debtor's Name	Amount	Amount	Amount

2.3 SUHRCO RESIDENTIAL PRO Last 4 digits of account number 1 0 1 3 \$ 8000 \$ 8000 \$ 0

Priority Creditor's Name
2010 156th AVE NE
Number Street
100
BELLEVUE WA 98007
City State ZIP Code

When was the debt incurred? 10/2014

As of the date you file, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:
☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify HOME OWNERS' DUES

Who incurred the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?
☒ No
☐ Yes

2.4 COMCAST Last 4 digits of account number 8 6 3 3 \$ 272 \$ 272 \$ 0

Priority Creditor's Name
P.O. BOX 34227
Number Street
SEATTLE WA 98124
City State ZIP Code

When was the debt incurred? 6/2015

As of the date you file, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:
☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify CABLE

Who incurred the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?
☒ No
☐ Yes

2.5 YES ENERGY MANAGEMENT Last 4 digits of account number 5 7 6 7 \$ 700 \$ 700 \$ 0

Priority Creditor's Name
P.O. BOX 82571
Number Street
GOLETA CA 93112
City State ZIP Code

When was the debt incurred? 7/2014

As of the date you file, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:
☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify WATER BILL

Who incurred the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?
☒ No
☐ Yes

NOTE: ADDITIONAL PAGES ATTACHED.

Debtor 1 Lydia Lutaaya Case number: 16-10516-CMA

PART 1: Your PRIORITY Unsecured Claims – continuation page

2.6 Priority creditor's Name: T MOBILE
P.O.Box 660252
Dallas, TX 75266

Last 4 digits of account number: 2479
When was the debt incurred? 04/24/2012
Who incurred the debt? Debtor 1
Type of PRIORITY unsecured claim: Cell phone Bill
Is the claim subject to offset? NO
Total Claim: \$365 Priority claim: \$365 - *cell phone Bill*

2.7 Priority Creditor's name: Department of the Treasury
Internal Revenue Services
Fresno, CA 93888

Last 4 digits of account number: 9528
When was the debt incurred? Tax year 2013, 2014, 2015
Who incurred the debt? Debtor 1
Type of PRIORITY unsecured claim: Taxes owed
Is the claim subject to offset? NO
Total claim: \$1000 Priority claim: \$1000 - *Taxes*

2.8 Priority Creditor's Name: Synchrony Bank
Care Credit
P.O.Box 960061
Orlando, FL 32896

Last 4 digits of account number: 7866
When was the debt incurred? 2014
Who incurred the debt? Debtor 1
Type of PRIORITY unsecured claim: Credit Card
Is the claim subject to offset? NO
Total Claim: \$4,325 Priority amount: \$4,325 - *CREDIT CARD*

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1: Lydia Lutaaya

Case number: 16-10516-CMA

2.9 Priority Creditor's Name: Seattle Municipal Court
600 5th Ave
Seattle, WA 98104

Last 4 digits of account number: 6352
When was the debt incurred? 12/2014
Who incurred the debt? Debtor 1
Type of PRIORITY unsecured claim: Traffic ticket
Is the claim subject to offset? NO
Total claim: \$150 Priority amount: \$150 -

2.10 Priority Creditor's Name: Century Link
P.O. BOX 11622
Seattle, WA 98111

Last 4 digits of account number: 708R
When was the debt incurred? 2014
Who incurred the debt? Debtor 1
Type of PRIORITY unsecured claim: Phone Bill
Is the claim subject to offset? NO
Total Claim: \$306 Priority amount: \$306

2.11 Priority Creditor's Name: US Bank
P.O. BOX 108
ST. LOUIS, MO 63166

Last 4 of account number: 9054
Last 4 of account number: 1602
When was the debt incurred? 2011 to 2013
Who incurred the debt? Debtor 1
Type of PRIORITY unsecured claim: Credit card
Is the claim subject to offset? NO
Total claim: 7,950 Priority amount: \$7,950
Total claim: \$9,240 Priority amount: \$9,240

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1: Lydia Lutaaya

Case number: 16-10516-CMA

2.12 Priority Creditor's Name: Puget Sound Energy
P.O. BOX 91269
Bellevue, WA 98009

Last 4 digits of account number: 0503
Last 4 digits of account number: 0149
When was the debt incurred? 2015
Who incurred the debt? Debtor 1
Type of PRIORITY unsecured claim: Electricity and Gas Bill
Is the claim subject to offset? No
Total claim: \$605 Priority amount: \$605
Total claim: \$310 Priority amount: \$310
Is the claim subject to offset? NO

2.13 Priority Creditor's Name: ADT SECURITY SYSTEMS
P.O. Box 371878
Pittsburgh, PA 15250

Last 4 digits of account number: 5104
When was the debt incurred? 2015
Who incurred the debt? Debtor 1
Type of PRIORITY unsecured claim: Alarm system Bill
Is the claim subject to offset? No
Total Claim: \$430 Priority claim: \$430

2.14. Priority Creditor's Name: Macy's Department Store
P.O.Box 689195
Des Moines, IA 50368

Last 4 digits of account number: 105-0
When was the debt incurred? 2011, 2012
Who incurred the debt? Debtor 1
Type of PRIORITY unsecured claim: Credit card
Is the claim subject to offset? No
Total claim: \$3,610 Priority claim: \$3,610

Schedule E/F: Creditors Who have Unsecured Claims

Debtor 1: Lydia Lutaaya

Case number: 16-10516-CMA

2.15 Priority Creditor's Name: Good To GO
P.O. BOX 34562
Seattle, WA 98124

Last 4 digits of account number: 3020
When was the debt incurred? 2014, 2015
Who incurred the debt? Debtor 1
Type of PRIORITY unsecured claim: Toll fee
Is the claim subject to offset? No
Total claim: \$100 Priority amount: \$100

Schedule E/F: Creditors Who have Unsecured Claims

Debtor 1

First Name

Middle Name

Last Name

LYDIA

LUTAYA

Case number (if known)

16-10516-CMA

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

- ☒ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☐ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1

Nonpriority Creditor's Name

Last 4 digits of account number

\$

When was the debt incurred?

Number Street

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify _____

4.2

Nonpriority Creditor's Name

Last 4 digits of account number

\$

When was the debt incurred?

Number Street

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify _____

4.3

Nonpriority Creditor's Name

Last 4 digits of account number

\$

When was the debt incurred?

Number Street

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify _____

Debtor 1

First Name

Middle Name

Last Name

LYDIA

LUTANAYA

Case number (if known)

16-10516-CMA

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

<div style="border: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Nonpriority Creditor's Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">City State ZIP Code</div> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Last 4 digits of account number \$</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">When was the debt incurred? </div> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input type="checkbox"/> Other. Specify _____</p>
<div style="border: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Nonpriority Creditor's Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">City State ZIP Code</div> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Last 4 digits of account number \$</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">When was the debt incurred? </div> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input type="checkbox"/> Other. Specify _____</p>
<div style="border: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Nonpriority Creditor's Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">City State ZIP Code</div> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Last 4 digits of account number \$</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">When was the debt incurred? </div> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input type="checkbox"/> Other. Specify _____</p>

LYDIA LUTANYA
First Name Middle Name Last Name

Case number (if known) 16-10516-CMA

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

PORTFOLIO RECOVERY ASSOCIATES
Name

On which entry in Part 1 or Part 2 did you list the original creditor?

RIVERSIDE Commerce Center
Number Street

Line 2.2 of (Check one): ☒ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

140 CORPORATE BLVD
City State ZIP Code

Last 4 digits of account number 5827

NORFOLK VIRGINIA 23502
City State ZIP Code

IC SYSTEMS
Name

On which entry in Part 1 or Part 2 did you list the original creditor?

P.O. BOX 64378
Number Street

Line 2.6 of (Check one): ☒ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured

Claims

ST. PAUL MN 55164
City State ZIP Code

Last 4 digits of account number 2479

MIDLAND CREDIT MANAGEMENT
Name

On which entry in Part 1 or Part 2 did you list the original creditor?

3875 AERO DRIVE
Number Street

Line 2.8 of (Check one): ☒ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured

SUITE 200
City State ZIP Code

Claims

SAN DIEGO CA 92123
City State ZIP Code

Last 4 digits of account number 7866

SIGNAL MANAGEMENT SERVICES
Name

On which entry in Part 1 or Part 2 did you list the original creditor?

P.O. BOX 11622
Number Street

Line 2.9 of (Check one): ☒ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured

Claims

TACOMA WA 98411
City State ZIP Code

Last 4 digits of account number 6352

EDS CCA
Name

On which entry in Part 1 or Part 2 did you list the original creditor?

P.O. BOX 981925
Number Street

Line 2.10 of (Check one): ☒ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured

Claims

BOSTON MA 02298
City State ZIP Code

Last 4 digits of account number 708R

AUDIT SYSTEMS INC
Name

On which entry in Part 1 or Part 2 did you list the original creditor?

3696 ULMERSON ROAD
Number Street

Line 2.13 of (Check one): ☒ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured

Claims

SUITE 200
City State ZIP Code

Last 4 digits of account number 5104

CLEARWATER FL 33762
City State ZIP Code

MACY'S BANKRUPTCY PROCESSING
Name

On which entry in Part 1 or Part 2 did you list the original creditor?

P.O. BOX 8053
Number Street

Line 2.14 of (Check one): ☒ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured

Claims

MASON OH 45040
City State ZIP Code

Last 4 digits of account number 1050

Debtor 1: Lydia Lutaaya

Case number: 16-10516-CMA

PART 3: List Others to BE Notified About a Debt That you have Already Listed

PAYMENT PROCESSING

Portfolio Recovery Associates, llc

P.O. Box 12914

Norfolk, VA 23541

On which entry in part 1 or part 2 did you list the original creditor?

Line 2.11 Part 1: Creditors with Priority Unsecured Claims

Last 4 digits of account number: 1602

Debtor 1

First Name

Middle Name

Last Name

LYDIA

LUTAYA

Case number (if known)

16-10516-CMA

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Total claims
from Part 1

6a. Domestic support obligations

6a. \$ 0

6b. Taxes and certain other debts you owe the government

6b. \$ 1000

6c. Claims for death or personal injury while you were intoxicated

6c. \$ 0

6d. Other. Add all other priority unsecured claims. Write that amount here.

6d. + \$ 42,669.00

6e. Total. Add lines 6a through 6d.

6e. \$ 43,669.00

Total claim

Total claims
from Part 2

6f. Student loans

6f. \$ 0

6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims

6g. \$ 0

6h. Debts to pension or profit-sharing plans, and other similar debts

6h. \$ 0

6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

6i. + \$ 0

6j. Total. Add lines 6f through 6i.

6j. \$ 0

Fill in this information to identify your case:

Debtor LYDIA LOTHMAN
First Name Middle Name Last Name

Debtor 2
(Spouse if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Western District of WA

Case number 16-10516-CMA
(If known)

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

2.1

Name _____
Number _____ Street _____
City _____ State _____ ZIP Code _____

2.2

Name _____
Number _____ Street _____
City _____ State _____ ZIP Code _____

2.3

Name _____
Number _____ Street _____
City _____ State _____ ZIP Code _____

2.4

Name _____
Number _____ Street _____
City _____ State _____ ZIP Code _____

2.5

Name _____
Number _____ Street _____
City _____ State _____ ZIP Code _____

Debtor 1

First Name

Middle Name

Last Name

LYDIA LUTANUA

Case number (if known)

16-10516-CMA

Additional Page If You Have More Contracts or Leases

Person or company with whom you have the contract or lease

What the contract or lease is for

2.2

Name

Number Street

City State ZIP Code

2.

Name

Number Street

City State ZIP Code

2.

Name

Number Street

City State ZIP Code

2.

Name

Number Street

City State ZIP Code

2.

Name

Number Street

City State ZIP Code

2.

Name

Number Street

City State ZIP Code

2.

Name

Number Street

City State ZIP Code

2.

Name

Number Street

City State ZIP Code

Fill in this information to identify your case:

Debtor 1	<u>LYDIA</u>	<u>LUTAMIA</u>
	First Name	Last Name
Debtor 2		
(Spouse, if filing)	First Name	Last Name
United States Bankruptcy Court for the:	<u>Western</u>	<u>WA</u>
	District of	
Case number	<u>16-10516-CMA</u>	
(If known)		

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

☒ No

☐ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☐ No. Go to line 3.

☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

☐ No

☐ Yes. In which community state or territory did you live? _____ Fill in the name and current address of that person.

Name of your spouse, former spouse, or legal equivalent

Number Street

City State ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Name

Number Street

City State ZIP Code

☐ Schedule D, line _____

☐ Schedule E/F, line _____

☐ Schedule G, line _____

3.2

Name

Number Street

City State ZIP Code

☐ Schedule D, line _____

☐ Schedule E/F, line _____

☐ Schedule G, line _____

3.3

Name

Number Street

City State ZIP Code

☐ Schedule D, line _____

☐ Schedule E/F, line _____

☐ Schedule G, line _____

Debtor 1

LYDIA

First Name

LUTANYA

Middle Name

Last Name

Case number (if known)

16-10516-CMA

Additional Page to List More Codebtors**Column 1: Your codebtor****Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

3. _	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	<input type="checkbox"/> Schedule D, line _____ <input type="checkbox"/> Schedule E/F, line _____ <input type="checkbox"/> Schedule G, line _____
3. _	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	<input type="checkbox"/> Schedule D, line _____ <input type="checkbox"/> Schedule E/F, line _____ <input type="checkbox"/> Schedule G, line _____
3. _	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	<input type="checkbox"/> Schedule D, line _____ <input type="checkbox"/> Schedule E/F, line _____ <input type="checkbox"/> Schedule G, line _____
3. _	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	<input type="checkbox"/> Schedule D, line _____ <input type="checkbox"/> Schedule E/F, line _____ <input type="checkbox"/> Schedule G, line _____
3. _	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	<input type="checkbox"/> Schedule D, line _____ <input type="checkbox"/> Schedule E/F, line _____ <input type="checkbox"/> Schedule G, line _____
3. _	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	<input type="checkbox"/> Schedule D, line _____ <input type="checkbox"/> Schedule E/F, line _____ <input type="checkbox"/> Schedule G, line _____
3. _	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	<input type="checkbox"/> Schedule D, line _____ <input type="checkbox"/> Schedule E/F, line _____ <input type="checkbox"/> Schedule G, line _____
3. _	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	<input type="checkbox"/> Schedule D, line _____ <input type="checkbox"/> Schedule E/F, line _____ <input type="checkbox"/> Schedule G, line _____

Fill in this information to identify your case:

Debtor 1 LYDIA LUTANA
First Name Middle Name Last Name
Debtor 2
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the Western District of WA
Case number 16-10516-CMA
(If known)

Check if this is:

- ☐ An amended filing
☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

- ☒ Employed
☐ Not employed

- ☐ Employed
☐ Not employed

Occupation

HOUSEKEEPER (part-time)

Employer's name

DANA'S HOUSEKEEPING

Employer's address

P.O. BOX 77546

Number Street

Number Street

SEATTLE WA 98033

City State ZIP Code

City State ZIP Code

How long employed there? 08/2014

Additional page attached:

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 1500

\$ _____

3. Estimate and list monthly overtime pay.

3. + \$ 0

+ \$ _____

4. Calculate gross income. Add line 2 + line 3.

4. \$ 1500

\$ _____

Additional Employer Information

**THE CLEANING COMPANY
6619 132ND AVENUE NE
#211
KIRKLAND, WA 98033**

**EMPLOYMNET STARTED: 01/16/2016
OCCUPATION: HOUSEKEEPER**

LYDIA

First Name

LUTAMIA

Middle Name

Last Name

16-10516-CMA

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here..... → 4.	\$ 1500	\$
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 150	\$
5b. Mandatory contributions for retirement plans	5b. \$ 0	\$
5c. Voluntary contributions for retirement plans	5c. \$ 0	\$
5d. Required repayments of retirement fund loans	5d. \$ 0	\$
5e. Insurance	5e. \$ 0	\$
5f. Domestic support obligations	5f. \$ 0	\$
5g. Union dues	5g. \$ 0	\$
5h. Other deductions. Specify: _____	5h. + \$ 0	+ \$
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ 150	\$
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 1350	\$
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0	\$
8b. Interest and dividends	8b. \$ 0	\$
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0	\$
8d. Unemployment compensation	8d. \$ 0	\$
8e. Social Security	8e. \$ 0	\$
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ 0	\$
8g. Pension or retirement income	8g. \$ 0	\$
8h. Other monthly income. Specify: _____	8h. + \$ 0	+ \$
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ 0	\$
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 1350.00 +	\$ = \$
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. + \$ 0	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies	12. \$ 1350.00	Combined monthly income
13. Do you expect an <u>increase</u> or decrease within the year after you file this form? <input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes. Explain: <u>Income will increase in one month once my nursing certificate is renewed. I plan to pick up a 40 hours a week shift. Applied for renewal</u>		

Fill in this information to identify your case:

Debtor 1 LYDIA LOJANAYA
First Name Middle Name Last Name
Debtor 2
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: Western District of WA
Case number 16-10516-CMA
(If known)

Check if this is:

- ☐ An amended filing
☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.
☐ Yes. Does Debtor 2 live in a separate household?
☐ No
☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- ☒ No
☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

- ☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

- 4a. Real estate taxes
4b. Property, homeowner's, or renter's insurance
4c. Home maintenance, repair, and upkeep expenses
4d. Homeowner's association or condominium dues

Your expenses

4. \$ 1870.00

4a. \$ 0

4b. \$ 0

4c. \$ 0

4d. \$ 310.00

Debtor 1

LYDIA

Middle Name

LUTANYA

Last Name

Case number (if known) 16-10516-CMA

	Your expenses
5. Additional mortgage payments for your residence, such as home equity loans	5. \$ 0
6. Utilities:	
6a. Electricity, heat, natural gas	6a. \$ 50
6b. Water, sewer, garbage collection	6b. \$ 50
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 30
6d. Other. Specify: _____	6d. \$ 0
7. Food and housekeeping supplies	7. \$ 150
8. Childcare and children's education costs	8. \$ 0
9. Clothing, laundry, and dry cleaning	9. \$ 00
10. Personal care products and services	10. \$ 50
11. Medical and dental expenses	11. \$ 20
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ 200
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$ 0
14. Charitable contributions and religious donations	14. \$ 0
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	15a. \$ 0
15b. Health insurance	15b. \$ 0
15c. Vehicle insurance	15c. \$ 0
15d. Other insurance. Specify: _____	15d. \$ 0
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ 0
17. Installment or lease payments:	
17a. Car payments for Vehicle 1	17a. \$ 0
17b. Car payments for Vehicle 2	17b. \$ 0
17c. Other. Specify: _____	17c. \$ 0
17d. Other. Specify: _____	17d. \$ 0
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$ 0
19. Other payments you make to support others who do not live with you. Specify: _____	19. \$ 0
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a. Mortgages on other property	20a. \$ 0
20b. Real estate taxes	20b. \$ 0
20c. Property, homeowner's, or renter's insurance	20c. \$ 0
20d. Maintenance, repair, and upkeep expenses	20d. \$ 0
20e. Homeowner's association or condominium dues	20e. \$ 0

Debtor 1

LYDIA

First Name

Middle Name

LUTAMANA

Last Name

Case number (if known) 16-10516-CMA

21. Other. Specify: _____

21. +\$ 0

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$ 2,730.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$ 0

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$ 2,730.00

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$ 1,350.00

23b. Copy your monthly expenses from line 22c above.

23b. -\$ 2,730.00

23c. Subtract your monthly expenses from your monthly income.
The result is your monthly net income.

23c. \$ -1,380.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.☐ Yes.

Explain here:

Fill in this information to identify your case:

Debtor 1 LYDIA LUATAYA
First Name Middle Name Last Name
Debtor 2
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: Western District of WA
Case number 16-10516-CMA
(If known)

Check if this is:

- ☐ An amended filing
☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J-2

Schedule J-2: Expenses for Separate Household of Debtor 2

12/15

Use this form for Debtor 2's separate household expenses ONLY IF Debtor 1 and Debtor 2 maintain separate households. If Debtor 1 and Debtor 2 have one or more dependents in common, list the dependents on both Schedule J and this form. Answer the questions on this form only with respect to expenses for Debtor 2 that are not reported on Schedule J. Be as complete and accurate as possible. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Do you and Debtor 1 maintain separate households?

- ☒ No. Do not complete this form.
☐ Yes

2. Do you have dependents?

Do not list Debtor 1 but list all other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on Schedule J.

Do not state the dependents' names.

☐ No

☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 2:

Dependent's age

Does dependent live with you?

- ☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes

3. Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1?

- ☐ No
☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$

If not included in line 4:

- 4a. Real estate taxes
4b. Property, homeowner's, or renter's insurance
4c. Home maintenance, repair, and upkeep expenses
4d. Homeowner's association or condominium dues

4a. \$
4b. \$
4c. \$
4d. \$

Debtor 1

LYDIA

First Name

LUTANYA

Middle Name

Last Name

Case number (if known)

16-10516-CMA

Your expenses

5. Additional mortgage payments for your residence, such as home equity loans 5. \$ _____
6. Utilities:
- 6a. Electricity, heat, natural gas 6a. \$ _____
- 6b. Water, sewer, garbage collection 6b. \$ _____
- 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ _____
- 6d. Other. Specify: _____ 6d. \$ _____
7. Food and housekeeping supplies 7. \$ _____
8. Childcare and children's education costs 8. \$ _____
9. Clothing, laundry, and dry cleaning 9. \$ _____
10. Personal care products and services 10. \$ _____
11. Medical and dental expenses 11. \$ _____
12. Transportation. Include gas, maintenance, bus or train fare.
Do not include car payments. 12. \$ _____
13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ _____
14. Charitable contributions and religious donations 14. \$ _____
15. Insurance.
Do not include insurance deducted from your pay or included in lines 4 or 20.
- 15a. Life Insurance 15a. \$ _____
- 15b. Health Insurance 15b. \$ _____
- 15c. Vehicle Insurance 15c. \$ _____
- 15d. Other Insurance. Specify: _____ 15d. \$ _____
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.
Specify: _____ 16. \$ _____
17. Installment or lease payments:
- 17a. Car payments for Vehicle 1 17a. \$ _____
- 17b. Car payments for Vehicle 2 17b. \$ _____
- 17c. Other. Specify: _____ 17c. \$ _____
- 17d. Other. Specify: _____ 17d. \$ _____
18. Your payments of alimony, maintenance, and support that you did not report as deducted from
your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ _____
19. Other payments you make to support others who do not live with you.
Specify: _____ 19. \$ _____
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.
- 20a. Mortgages on other property 20a. \$ _____
- 20b. Real estate taxes 20b. \$ _____
- 20c. Property, homeowner's, or renter's insurance 20c. \$ _____
- 20d. Maintenance, repair, and upkeep expenses 20d. \$ _____
- 20e. Homeowner's association or condominium dues 20e. \$ _____

Debtor 1 LYDIA LOTANYA
First Name Middle Name Last Name

Case number (if known) 16-10516-CMA

21. Other. Specify: _____

21. +\$ _____

22. Your monthly expenses. Add lines 5 through 21.

The result is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedule J to calculate the total expenses for Debtor 1 and Debtor 2.

22. \$ _____

23. Line not used on this form.

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

☐ Yes.

Explain here:

Fill in this information to identify your case:

Debtor 1 LYDIA LOTANYA
First Name Middle Name Last Name
Debtor 2
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the Western District of WA
Case number 16-10516-CMA
(If known)

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

x Lydia Lotanya
Signature of Debtor 1

x _____
Signature of Debtor 2

Date 02/17/2016
MM / DD / YYYY

Date _____
MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1 LYDIA LOPANGA
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Western District of WA

Case number 16-10516-CMA
(If known)

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- ☐ Married
☒ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
		<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
Number Street	From To	Number Street	From To
City State ZIP Code		City State ZIP Code	
		<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
Number Street	From To	Number Street	From To
City State ZIP Code		City State ZIP Code	

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No
☐ Yes. Make sure you fill out *Schedule H: Your Creditors* (Official Form 106H).

Part 2: Explain the Sources of Your Income

Debtor 1

LYDIA

First Name

Middle Name

LUTAYA

Last Name

Case number (if known)

16-10516-CMA

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

☐ No☒ Yes. Fill in the details.

	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ 1,500	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$
For last calendar year: (January 1 to December 31, 2015)	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ 6,945.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$
For the calendar year before that: (January 1 to December 31, 2014)	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ 5,000.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

☐ No☒ Yes. Fill in the details.

	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	REFUND ON PROPERTY TAX from KING	\$ 1,080.14		\$
For last calendar year: (January 1 to December 31,)		\$		\$
For the calendar year before that: (January 1 to December 31,)		\$		\$

Debtor 1

LYDIA

First Name

Middle Name

LUTAYA

Last Name

Case number (if known)

16-10516-CMA

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more?

- ☐ No. Go to line 7.

- ☐ Yes. List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☒ No. Go to line 7.

- ☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name	Date of payment	Total amount paid	Amount you still owe	Was this payment for...
Creditor's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Creditor's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Creditor's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____

Debtor 1

LYDIA

First Name

Lotaryn

Middle Name

Last Name

Case number (if known)

16-10516-CMA

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an Insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☒ No☐ Yes. List all payments to an insider.

Insider's Name	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name		\$	\$	
Number Street				
City State ZIP Code				
Insider's Name		\$	\$	
Number Street				
City State ZIP Code				

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

☒ No☐ Yes. List all payments that benefited an insider.

Insider's Name	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name		\$	\$	
Number Street				
City State ZIP Code				
Insider's Name		\$	\$	
Number Street				
City State ZIP Code				

Debtor 1

LYDIA LUTANNA
 First Name Middle Name Last Name

Case number (if known) 16-10516-CMA

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

☐ No

☒ Yes. Fill in the details.

Case title	Nature of the case	Court or agency	Status of the case
LYDIA LUTANNA BECCU	CIVIL	SUPERIOR COURT 401 FOURTH AVE N KENT WA 98032	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number 15-2-22946-DKWIT			
LYDIA LUTANNA BECCU	CIVIL	COURT OF APPEALS 600 UNIVERSITY ST SEATTLE WA 98101	<input type="checkbox"/> Pending <input checked="" type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number 74563-8			

* ADDITIONAL PAGES ATTACHED.

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

☐ No. Go to line 11.

☒ Yes. Fill in the information below.

Creditor's Name	Describe the property	Date	Value of the property
BECCU P.O. BOX 97050	3001 SE 10TH ST #1013 RENTON WA 98058	2015	\$ 203,627.00
	Explain what happened		
	<input type="checkbox"/> Property was repossessed.		
	<input checked="" type="checkbox"/> Property was foreclosed.		
	<input type="checkbox"/> Property was garnished.		
	<input type="checkbox"/> Property was attached, seized, or levied.		
SEATTLE WA 98124			
BECCU P.O. BOX 97050	CAR - KIA SORENTO 2010 ABD 9377	06/2015	\$ 13,000
	Explain what happened		
	<input checked="" type="checkbox"/> Property was repossessed.		
	<input type="checkbox"/> Property was foreclosed.		
	<input type="checkbox"/> Property was garnished.		
	<input type="checkbox"/> Property was attached, seized, or levied.		
SEATTLE WA 98124			

Debtor 1 LYDIA LUTAAYA

CASE NO: 16-10516-CMA

PART 4: IDENTIFY LEGAL ACTIONS, REPOSSESSIONS, AND FORECLOSURES

CONTINUED:

Case title:

Lydia Lutaaya

V

Suhrco Residential, el

Nature of case: CIVIL

Court: Superior Court

401 Fourth Ave N
Kent, WA 98032

Case No: 15-2-20814-4KNT

Status of case: pending

Case title:

Lydia Lutaaya

V

ADT Security Systems

Case No: 15-2-27141-5KNT

Nature of case: CIVIL

Court: Superior Court

401 Fourth Ave N
Kent, WA 98032

Status of case: Pending

Case title:

Lydia Lutaaya

V

Puget Sound Energy

Nature of case: CIVIL

Court: Superior Court

401 Fourth Ave N
Kent, WA 98032

Case No: 15-2-25343-3KNT

Status of case: Concluded

Case title:

Lydia Lutaaya

V

Renton PD and BECU

Nature of case: CIVIL

Court: Superior Court

516 Third Avenue
Seattle, WA 98104

Case No: 142126069SEA

Status of case: Concluded

Debtor 1: Lydia Lutaaya

Case No: 16-10516-CMA

Case title:

BECU

V

Lydia Lutaaya

Nature of case: CIVIL

Court: Superior Court
516 Third Ave
Seattle, WA 98104

Case No: 15-2-02007-2SEA

Status of case: Concluded

Case title:

Lydia Lutaaya

V

Renton Police Dept

Nature of case: CIVIL

claim submitted to the
City of Renton
C/o: Jeremy Culumber
Attorney for City of Renton
Keating, Bucklin and McCo
800 5th Avenue #4141
Seattle, WA 98104

Status of case: Pending

Case title:

Vivian Azzola, William Hewwett

V

Lydia Lutaaya

Nature of case: Harassment

Court: Burien Courthouse
601 SW 149th ST
Burien, WA 98166

Case No: 144-00849

Status of case: Concluded

Debtor 1

LUDIA

First Name

LUTANGA

Middle Name

Last Name

Case number (if known)

16-10516-CMA

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

☒ No

☐ Yes. Fill in the details.

Creditor's Name	Describe the action the creditor took	Date action was taken	Amount
Number _____ Street _____ City _____ State _____ ZIP Code _____			\$ _____

Last 4 digits of account number: XXXX- _____

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

☒ No

☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

☒ No

☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift _____ Number _____ Street _____ City _____ State _____ ZIP Code _____ Person's relationship to you _____			\$ _____
Person to Whom You Gave the Gift _____ Number _____ Street _____ City _____ State _____ ZIP Code _____ Person's relationship to you _____			\$ _____

Debtor 1

LYDIA

First Name

LUTANNA

Middle Name

Last Name

Case number (if known)

16-10516-CMA

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

☒ No

☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities
that total more than \$600

Describe what you contributed

Date you
contributed

Value

Charity's Name

Number Street

City State ZIP Code

\$

\$

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

☒ No

☐ Yes. Fill in the details.

Describe the property you lost and
how the loss occurred

Describe any insurance coverage for the loss

Include the amount that insurance has paid. List pending insurance
claims on line 33 of Schedule AB: Property.

Date of your
loss

Value of property
lost

\$

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☒ No

☐ Yes. Fill in the details.

Description and value of any property transferred

Date payment or
transfer was
made

Amount of payment

Person Who Was Paid

Number Street

City State ZIP Code

Email or website address

Person Who Made the Payment, if Not You

\$

\$

Debtor 1

LYDIA

First Name

Middle Name

LUTAYA

Last Name

Case number (if known)

16-10516-CMA

Description and value of any property transferred		Date payment or transfer was made	Amount of payment
Person Who Was Paid			\$
Number Street			\$
City State ZIP Code			
Email or website address			
Person Who Made the Payment, if Not You			

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?
Do not include any payment or transfer that you listed on line 16.

- ☒ No
☐ Yes. Fill in the details.

Description and value of any property transferred		Date payment or transfer was made	Amount of payment
Person Who Was Paid			\$
Number Street			\$
City State ZIP Code			

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?
Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).
Do not include gifts and transfers that you have already listed on this statement.

- ☒ No
☐ Yes. Fill in the details.

Description and value of property transferred		Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer			
Number Street			
City State ZIP Code			
Person's relationship to you			
Person Who Received Transfer			
Number Street			
City State ZIP Code			
Person's relationship to you			

Debtor 1

LYDIA

First Name

Middle Name

LUTANYA

Last Name

Case number (if known) 16-10516-CMA

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

☒ No

☐ Yes. Fill in the details.

Description and value of the property transferred

Date transfer was made

Name of trust

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

☒ No

☐ Yes. Fill in the details.

Name of Financial Institution	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Name of Financial Institution Number Street City State ZIP Code	XXXX- _____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
Name of Financial Institution Number Street City State ZIP Code	XXXX- _____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

☒ No

☐ Yes. Fill in the details.

Name of Financial Institution	Who else had access to it?	Describe the contents	Do you still have it?
Name of Financial Institution Number Street City State ZIP Code	Name Number Street City State ZIP Code	<div style="border: 1px solid black; height: 100px; width: 100%;"></div>	<input type="checkbox"/> No <input type="checkbox"/> Yes
Name of Financial Institution Number Street City State ZIP Code	Name Number Street City State ZIP Code		

Debtor 1

First Name

Middle Name

Last Name

LYDIA

LUTAYA

Case number (if known)

16-10516-CMA

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

☒ No☐ Yes. Fill in the details.

Who else has or had access to it?

Describe the contents

Do you still have it?

Name of Storage Facility

Name

Number Street

Number Street

City State ZIP Code

City

State

ZIP Code

☐ No☐ Yes**Part 9: Identify Property You Hold or Control for Someone Else**

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

☒ No☐ Yes. Fill in the details.

Where is the property?

Describe the property

Value

Owner's Name

Number Street

Number Street

City

State

ZIP Code

City

State

ZIP Code

\$

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

☒ No☐ Yes. Fill in the details.

Governmental unit

Environmental law, if you know it

Date of notice

Name of site

Governmental unit

Number Street

Number Street

City

State

ZIP Code

City

State

ZIP Code

Debtor 1

LYDIA

Middle Name

LUTANYA

Last Name

Case number (if known)

16-10516-CMA

25. Have you notified any governmental unit of any release of hazardous material?



No

☐ Yes. Fill in the details.

Governmental unit

Environmental law, if you know it

Date of notice

Name of site

Governmental unit

Number Street

Number Street

City

State

ZIP Code

City

State

ZIP Code

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.



No

☐ Yes. Fill in the details.

Court or agency

Nature of the case

Status of the case

Case title

Court Name

Case number

City

State

ZIP Code

☐ Pending☐ On appeal☐ Concluded

Part 11:

Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☐ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☐ An owner of at least 5% of the voting or equity securities of a corporation



No. None of the above applies. Go to Part 12.

☐ Yes. Check all that apply above and fill in the details below for each business.

Describe the nature of the business

Employer identification number

Do not include Social Security number or ITIN.

Business Name

Number Street

EIN: _____

Name of accountant or bookkeeper

Dates business existed

City

State

ZIP Code

From _____

To _____

Describe the nature of the business

Employer identification number

Do not include Social Security number or ITIN.

Business Name

Number Street

EIN: _____

Name of accountant or bookkeeper

Dates business existed

City

State

ZIP Code

From _____

To _____

02/17/2016

TO: Micheal Fitzgerald
Chapter 13 bankruptcy Trustee
600 University St # 2200
Seattle, WA 98101

From: Lydia Lutaaya
3001 SE 10th ST
#1013
Renton, WA 98058
Tel: 206-321-1057

Chapter 13 # 16-10516

EXPLANATION AS TO WHY I HAVE A DEFICIT ON MY PAYMENT PLAN

Please be notified that I have gone through hell the last 2 years and the circumstances beyond my control are the ones that forced me into unemployment. I had never been late on a payment before for the last 17 years.

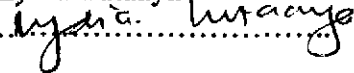
I am a very responsible person who had done so well for my self. I am just starting to rebuild my life after having lost pretty much everything...my nice job, my car, my reputation, my family. At the moment, the only thing I have left that I am still holding on is my home.

I am starting to rebuild and get my life back on track. I have a part time job and I have submitted an application to renew my certified nursing assistant certificate. As soon as I obtain the certificate, I should be able to pick up a 40 hrs a week shift as a caregiver and that should bring in about \$2600 a month. I should be able to get a job as a caregiver within a month. This will help with the deficit and I will be able to make my payments as per the payment plan.

Thank you

Sincerely

Lydia Lutaaya



Debtor 1

LYDIA

First Name

Middle Name

LUTAYA

Last Name

Case number (if known) 16-10516-CMA

Business Name

Number Street

City

State

ZIP Code

Describe the nature of the business

Name of accountant or bookkeeper

Employer identification number

Do not include Social Security number or ITIN.

EIN: _____

Dates business existed

From _____ To _____

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

☒ No

☐ Yes. Fill in the details below.

Date issued

Name

MM / DD / YYYY

Number Street

City

State

ZIP Code

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

x Lydia Lutaya

Signature of Debtor 1

x

Signature of Debtor 2

Date 02/17/2016

Date _____

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

☐ No

☒ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).